

Fill in this information to identify the case:

Debtor name Eat Fit Go Healthy Foods - Omaha, LLC

United States Bankruptcy Court for the: DISTRICT OF NEBRASKA

Case number (if known) 18-81126

☐ Check if this is an amended filing

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ *Amended Schedule*
- ☐ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration

I declare under penalty of perjury that the foregoing is true and correct.

Executed on September 17, 2018

X /s/ Brock Hubert

Signature of individual signing on behalf of debtor

Brock Hubert

Printed name

CEO

Position or relationship to debtor

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Debtor name Eat Fit Go Healthy Foods - Omaha, LLC

United States Bankruptcy Court for the: DISTRICT OF NEBRASKA

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Official Form 206Sum
Summary of Assets and Liabilities for Non-Individuals

12/15

Part 1: Summary of Assets

1. **Schedule A/B: Assets-Real and Personal Property** (Official Form 206A/B)

1a. Real property: Copy line 88 from <i>Schedule A/B</i>	\$ 0.00
1b. Total personal property: Copy line 91A from <i>Schedule A/B</i>	\$ 752,918.93
1c. Total of all property: Copy line 92 from <i>Schedule A/B</i>	\$ 752,918.93

Part 2: Summary of Liabilities

2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D) Copy the total dollar amount listed in Column A, <i>Amount of claim</i> , from line 3 of <i>Schedule D</i>	\$ 700,000.00
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)	
3a. Total claim amounts of priority unsecured claims: Copy the total claims from Part 1 from line 5a of <i>Schedule E/F</i>	\$ 0.00
3b. Total amount of claims of nonpriority amount of unsecured claims: Copy the total of the amount of claims from Part 2 from line 5b of <i>Schedule E/F</i>	+\$ 5,696.96
4. Total liabilities Lines 2 + 3a + 3b	\$ 705,696.96

Fill in this information to identify the case:

Debtor name **Eat Fit Go Healthy Foods - Omaha, LLC**United States Bankruptcy Court for the: **DISTRICT OF NEBRASKA**Case number (if known) **18-81126**☐ Check if this is an amended filing

Official Form 206A/B

Schedule A/B: Assets - Real and Personal Property

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents

1. Does the debtor have any cash or cash equivalents?

- ☐ No. Go to Part 2.
☒ Yes Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor

Current value of debtor's interest

2. Cash on hand

\$4,618.50

3. Checking, savings, money market, or financial brokerage accounts (Identify all)

Name of institution (bank or brokerage firm)

Type of account

Last 4 digits of account number

3.1. Access Bank

Checking

0043

\$28,081.37

4. Other cash equivalents (Identify all)

5. Total of Part 1.

\$32,699.87

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

Part 2: Deposits and Prepayments

6. Does the debtor have any deposits or prepayments?

- ☐ No. Go to Part 3.
☒ Yes Fill in the information below.

7. Deposits, including security deposits and utility deposits

Description, including name of holder of deposit

7.1. Brook References and Attachment but I don't see anything disucssing this...

\$22,896.61

8. Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent

Description, including name of holder of prepayment

Debtor Eat Fit Go Healthy Foods - Omaha, LLC
Name

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9. **Total of Part 2.**

Add lines 7 through 8. Copy the total to line 81.

\$22,896.61

Part 3: Accounts receivable

10. **Does the debtor have any accounts receivable?**

- ☒ No. Go to Part 4.
☐ Yes Fill in the information below.

Part 4: Investments

13. **Does the debtor own any investments?**

- ☒ No. Go to Part 5.
☐ Yes Fill in the information below.

Part 5: Inventory, excluding agriculture assets

18. **Does the debtor own any inventory (excluding agriculture assets)?**

- ☐ No. Go to Part 6.
☒ Yes Fill in the information below.

	General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
19.	Raw materials				
20.	Work in progress				
21.	Finished goods, including goods held for resale Packaged Meals	07/31/2018	\$12,267.91		\$12,267.91
22.	Other inventory or supplies Store Supplies	07/31/2018	\$16,282.48		\$16,282.48

23. **Total of Part 5.**

Add lines 19 through 22. Copy the total to line 84.

\$28,550.39

24. **Is any of the property listed in Part 5 perishable?**

- ☐ No
☒ Yes

25. **Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?**

- ☐ No
☒ Yes. Book value 12267.91 Valuation method FIFO Current Value 12267.91

26. **Has any of the property listed in Part 5 been appraised by a professional within the last year?**

- ☒ No
☐ Yes

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)

27. **Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?**

- ☒ No. Go to Part 7.
☐ Yes Fill in the information below.

Debtor Eat Fit Go Healthy Foods - Omaha, LLC
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Part 7: Office furniture, fixtures, and equipment; and collectibles

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

- ☐ No. Go to Part 8.
☒ Yes Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39. Office furniture See Attachment A/B	\$14,570.88		\$14,570.88

40. Office fixtures

41. Office equipment, including all computer equipment and communication systems equipment and software

42. Collectibles Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles

43. Total of Part 7.

Add lines 39 through 42. Copy the total to line 86.

\$14,570.88

44. Is a depreciation schedule available for any of the property listed in Part 7?

- ☒ No
☐ Yes

45. Has any of the property listed in Part 7 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Part 8: Machinery, equipment, and vehicles

46. Does the debtor own or lease any machinery, equipment, or vehicles?

- ☐ No. Go to Part 9.
☒ Yes Fill in the information below.

General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles			
48. Watercraft, trailers, motors, and related accessories Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels			
49. Aircraft and accessories			
50. Other machinery, fixtures, and equipment (excluding farm machinery and equipment) See Attachment A/B	\$85,861.07		\$85,861.07

51. Total of Part 8.

Add lines 47 through 50. Copy the total to line 87.

\$85,861.07

Debtor Eat Fit Go Healthy Foods - Omaha, LLC
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52. Is a depreciation schedule available for any of the property listed in Part 8?

- ☒ No
☐ Yes

53. Has any of the property listed in Part 8 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Part 9: Real property

54. Does the debtor own or lease any real property?

- ☒ No. Go to Part 10.
☐ Yes Fill in the information below.

Part 10: Intangibles and intellectual property

59. Does the debtor have any interests in intangibles or intellectual property?

- ☐ No. Go to Part 11.
☒ Yes Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
60. Patents, copyrights, trademarks, and trade secrets			
61. Internet domain names and websites			
62. Licenses, franchises, and royalties			
63. Customer lists, mailing lists, or other compilations			
64. Other intangibles, or intellectual property See Attachment A/B	\$24,985.53		\$24,985.53

65. Goodwill

66. Total of Part 10.

Add lines 60 through 65. Copy the total to line 89.

\$24,985.53

67. Do your lists or records include personally identifiable information of customers (as defined in 11 U.S.C. §§ 101(41A) and 107)?

- ☒ No
☐ Yes

68. Is there an amortization or other similar schedule available for any of the property listed in Part 10?

- ☒ No
☐ Yes

69. Has any of the property listed in Part 10 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Part 11: All other assets

70. Does the debtor own any other assets that have not yet been reported on this form?

Include all interests in executory contracts and unexpired leases not previously reported on this form.

- ☐ No. Go to Part 12.
☒ Yes Fill in the information below.

Debtor Eat Fit Go Healthy Foods - Omaha, LLC
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Current value of
debtor's interest

71. **Notes receivable**
Description (include name of obligor)
72. **Tax refunds and unused net operating losses (NOLs)**
Description (for example, federal, state, local)
73. **Interests in insurance policies or annuities**
74. **Causes of action against third parties (whether or not a lawsuit has been filed)**
75. **Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims**
76. **Trusts, equitable or future interests in property**
77. **Other property of any kind not already listed** *Examples: Season tickets, country club membership*

Leasehold Improvements - See Attachment A/B

\$525,544.36

Sinage - See Attachment A/B

\$17,810.22

78. **Total of Part 11.**
Add lines 71 through 77. Copy the total to line 90.
79. **Has any of the property listed in Part 11 been appraised by a professional within the last year?**
☒ No
☐ Yes

\$543,354.58

Debtor Eat Fit Go Healthy Foods - Omaha, LLC
Name

Case number (If known) 18-81126

Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1</i>	<u>\$32,699.87</u>	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	<u>\$22,896.61</u>	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	<u>\$0.00</u>	
83. Investments. <i>Copy line 17, Part 4.</i>	<u>\$0.00</u>	
84. Inventory. <i>Copy line 23, Part 5.</i>	<u>\$28,550.39</u>	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	<u>\$0.00</u>	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	<u>\$14,570.88</u>	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	<u>\$85,861.07</u>	
88. Real property. <i>Copy line 56, Part 9.....></i>		<u>\$0.00</u>
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	<u>\$24,985.53</u>	
90. All other assets. <i>Copy line 78, Part 11.</i>	+ <u>\$543,354.58</u>	
91. Total. Add lines 80 through 90 for each column	<u>\$752,918.93</u>	+ 91b. <u>\$0.00</u>
92. Total of all property on Schedule A/B. Add lines 91a+91b=92		<u>\$752,918.93</u>

EAT FIT GO OMAHA LLC- ATTACHMENT A/B

Asset	Property Description	Service	Cost	179 Exp	Value	Depreciation	Depreciation	End Depr	Book Value
	100 Tenant Improvement 180 & Dodge		2/22/16 \$209,748.00	\$0.00	\$0.00	\$80,403.40	\$41,949.60	\$122,353.00	\$87,395.00
	101 Tenant Improvement Aksarben		5/31/16 \$164,114.00	\$0.00	\$0.00	\$54,704.67	\$32,822.80	\$87,527.47	\$76,586.53
	102 Tenant Improvement Maple		08/03/16 \$166,730.00	\$0.00	\$0.00	\$47,240.17	\$33,346.00	\$80,586.17	\$86,143.83
	103 Tenant Improvement Paxton/Farnam		12/23/16 \$136,076.59	\$0.00	\$0.00	\$29,563.69	\$27,215.32	\$56,779.01	\$79,297.58
	104 Tenant Improvement Paxton/Farnam		01/01/17 \$30,880.00	\$0.00	\$0.00	\$6,176.00	\$6,176.00	\$12,352.00	\$18,528.00
	105 Tenant Improvement Lumberyard/Millard		12/30/16 \$152,356.50	\$0.00	\$0.00	\$33,081.30	\$30,471.30	\$63,552.60	\$88,803.90
	106 Tenant Improvement (Papillion) - 7 yr		2/10/17 \$32,859.00	\$0.00	\$0.00	\$6,024.15	\$6,571.80	\$12,595.95	\$20,263.05
	107 Tenant Improvement (Papillion) - 15 yr		2/10/17 \$111,124.00	\$0.00	\$0.00	\$20,372.73	\$22,224.80	\$42,597.53	\$68,526.47
		Leasehold Improvement	\$1,003,888.09	\$0.00	\$0.00	\$277,566.11	\$200,777.62	\$478,343.73	\$525,544.36
Group: Signage									
	73 Signage		9/28/15 \$13,866.30	\$0.00	\$0.00	\$6,470.94	\$2,773.26	\$9,244.20	\$4,622.10
	74 Signage (Maple)		5/11/16 \$13,863.00	\$0.00	\$0.00	\$4,092.89	\$2,772.60	\$6,865.49	\$6,997.51
	75 Signage (Millard)		12/31/16 \$5,290.00	\$0.00	\$0.00	\$1,120.98	\$1,058.00	\$2,178.98	\$3,111.02
	76 Signage (Millard)		1/30/17 \$4,993.93	\$0.00	\$0.00	\$915.55	\$998.79	\$1,914.34	\$3,079.59
		Signage	\$38,013.23	\$0.00	\$0.00	\$12,600.36	\$7,602.65	\$20,203.01	\$17,810.22
		Grand Total	\$1,307,161.97	\$0.00	\$0.00	\$378,284.83	\$260,105.08	\$638,389.91	\$668,772.06

Fill in this information to identify the case:

Debtor name **Eat Fit Go Healthy Foods - Omaha, LLC**

United States Bankruptcy Court for the: **DISTRICT OF NEBRASKA**

Case number (if known) **18-81126**

☐ Check if this is an amended filing

Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

- ☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim
2.1 Access Bank Creditor's Name 8712 West Dodge Road Omaha, NE 68114 Creditor's mailing address Creditor's email address, if known Date debt was incurred Last 4 digits of account number Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.	Describe debtor's property that is subject to a lien All Assets. Describe the lien Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) As of the petition filing date, the claim is: Check all that apply <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$700,000.00 Unknown

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

\$700,000.00

Part 2: List Others to Be Notified for a Debt Already Listed in Part 1

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address

On which line in Part 1 did you enter the related creditor?

Last 4 digits of account number for this entity

Fill in this information to identify the case:

Debtor name **Eat Fit Go Healthy Foods - Omaha, LLC**

United States Bankruptcy Court for the: **DISTRICT OF NEBRASKA**

Case number (if known) **18-81126**

☐ Check if this is an amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

☐ No. Go to Part 2.

☒ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

2.1 Priority creditor's name and mailing address

See Attachment E

As of the petition filing date, the claim is:

Check all that apply.

☒ Contingent

☒ Unliquidated

☒ Disputed

Date or dates debt was incurred

Basis for the claim:

Last 4 digits of account number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (4)

Is the claim subject to offset?

☒ No

☐ Yes

Total claim Priority amount

Unknown Unknown

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

3.1 Nonpriority creditor's name and mailing address

**180 Burke, LLC
1925 N. 120th St.
Omaha, NE 68154**

Date(s) debt was incurred _

Last 4 digits of account number _

As of the petition filing date, the claim is: *Check all that apply.*

☒ Contingent

☒ Unliquidated

☒ Disputed

Basis for the claim: _

Is the claim subject to offset? ☒ No ☐ Yes

Amount of claim

Unknown

3.2 Nonpriority creditor's name and mailing address

**8877 South 137th Circle, LLC
14803 Frontier Road
Omaha, NE 68138**

Date(s) debt was incurred _

Last 4 digits of account number _

As of the petition filing date, the claim is: *Check all that apply.*

☒ Contingent

☒ Unliquidated

☒ Disputed

Basis for the claim: _

Is the claim subject to offset? ☒ No ☐ Yes

Unknown

Debtor **Eat Fit Go Healthy Foods - Omaha, LLC** Case number (if known) **18-81126**

3.3	Nonpriority creditor's name and mailing address City of Omaha Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$16.00
3.4	Nonpriority creditor's name and mailing address ConAgra Foods, Inc. Attn: Sr. Director of Real Estate & Faci Eleven ConAgra Drive Omaha, NE 68102 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.5	Nonpriority creditor's name and mailing address Cox Communications 401 n 117th St Omaha, NE 68154 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.6	Nonpriority creditor's name and mailing address Halo Banded Solutions, Inc. Attn: John Campbell, Director of Corpora 1980 Industrial Drive Sterling, IL 61081 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$367.03
3.7	Nonpriority creditor's name and mailing address Lanoha 135 Millard LLC Attn: Kris Carter 19111 W. Center Rd Omaha, NE 68130 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.8	Nonpriority creditor's name and mailing address Lutz 13616 California St Ste 300 Omaha, NE 68154-5336 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,985.25
3.9	Nonpriority creditor's name and mailing address Marking Refrigeration, Inc. 4760 South 134th Street Omaha, NE 68137 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$252.67

Debtor	Name	Case number (if known)	18-81126
3.10	Nonpriority creditor's name and mailing address Michael Management Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$251.00
3.11	Nonpriority creditor's name and mailing address MUD 1723 Harney st Omaha, NE 68102 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.12	Nonpriority creditor's name and mailing address OPPD PO Box 3995 Omaha, NE 68103-0995 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.13	Nonpriority creditor's name and mailing address Paxton Group, LLC c/o Elkco Properties, Inc. 999 S Logan St., Suite 300 Denver, CO 80209 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.14	Nonpriority creditor's name and mailing address Royce Grayhawk, LLC 12910 Pierce St., Suite 110 Dallas, TX 68144 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown
3.15	Nonpriority creditor's name and mailing address Thermal Services 13330 I Street Omaha, NE 68137 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,825.01
3.16	Nonpriority creditor's name and mailing address Waitt Aksarben 8, LLC c/o Noddle Companies, 2285 S 67th St. Su Omaha, NE 68106 Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input checked="" type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: ____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	Unknown

Debtor Eat Fit Go Healthy Foods - Omaha, LLC Case number (if known) 18-81126

Name

3.17 Nonpriority creditor's name and mailing address As of the petition filing date, the claim is: Check all that apply. Unknown

WC 370 LLC
17105 South Highway 50
Springfield, NE 68059

- ☒ Contingent
☒ Unliquidated
☒ Disputed

Date(s) debt was incurred

Basis for the claim:

Last 4 digits of account number

Is the claim subject to offset? ☒ No ☐ Yes

Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address

On which line in Part 1 or Part 2 is the related creditor (if any) listed?

Last 4 digits of account number, if any

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1

5b. Total claims from Part 2

5c. Total of Parts 1 and 2

Lines 5a + 5b = 5c.

Total of claim amounts	
5a.	\$ <u>0.00</u>
5b. +	\$ <u>5,696.96</u>
5c.	\$ <u>5,696.96</u>

EAT FIT GO OMAHA, LLC - ATTACHMENT E								
Company	NAME	Address	Type of Priority	Contingent	Unliquidated	Disputed	Claim Amount	Priority Amount
EAT FIT GO HEALTHY FOODS OMAHA LLC	Nihsen, Bailey A	1011 N 192nd Ct. Apt. 327 Elkhorn, NE 68022 UNITED STATES	Wages, Salaries, and Commissions	X	X	X	Unknown	Unknown
EAT FIT GO HEALTHY FOODS OMAHA LLC	Ancona, Maria	1012 Skyline Dr Elkhorn, NE 68022 Douglas County UNITED STATES	Wages, Salaries, and Commissions	X	X	X	Unknown	Unknown
EAT FIT GO HEALTHY FOODS OMAHA LLC	Burch, Tyler	10212 Y St Omaha, NE 68127 Douglas County UNITED STATES	Wages, Salaries, and Commissions	X	X	X	Unknown	Unknown
EAT FIT GO HEALTHY FOODS OMAHA LLC	Rojas, Mikaela Kate	10903 Paul Plaza #912 Omaha, NE 68154 Douglas County UNITED STATES	Wages, Salaries, and Commissions	X	X	X	Unknown	Unknown
EAT FIT GO HEALTHY FOODS OMAHA LLC	Markham, Erin	125 W Broadway Apt 207 Council Bluffs, IA 51503 Pottawattamie County UNITED STATES	Wages, Salaries, and Commissions	X	X	X	Unknown	Unknown
EAT FIT GO HEALTHY FOODS OMAHA LLC	Kouba, Morgahn	12568 S 82nd St Papillion, NE 68046 Sarpy County UNITED STATES	Wages, Salaries, and Commissions	X	X	X	Unknown	Unknown
EAT FIT GO HEALTHY FOODS OMAHA LLC	Ponack, Nicole Brooke	13016 Chandler Rd La Vista, NE 68128 Sarpy County UNITED STATES	Wages, Salaries, and Commissions	X	X	X	Unknown	Unknown
EAT FIT GO HEALTHY FOODS OMAHA LLC	Madison, Hannah	13806 Clearwater Dr Papillion, NE 68133 Sarpy County UNITED STATES	Wages, Salaries, and Commissions	X	X	X	Unknown	Unknown
EAT FIT GO HEALTHY FOODS OMAHA LLC	Vaughn, Allyson	14801 Pratt Ct #102 Omaha, NE 68116 Douglas County UNITED STATES	Wages, Salaries, and Commissions	X	X	X	Unknown	Unknown
EAT FIT GO HEALTHY FOODS OMAHA LLC	Polsley, Abby	15057 Emmett St Omaha, NE 68116 UNITED STATES	Wages, Salaries, and Commissions	X	X	X	Unknown	Unknown
EAT FIT GO HEALTHY FOODS OMAHA LLC	Bird, Erik S	15916 Lake St. Omaha, NE 68116 UNITED STATES	Wages, Salaries, and Commissions	X	X	X	Unknown	Unknown
EAT FIT GO HEALTHY FOODS OMAHA LLC	McCulley, Maison	17831 Harney St Omaha, NE 68118 Douglas County UNITED STATES	Wages, Salaries, and Commissions	X	X	X	Unknown	Unknown

EAT FIT GO OMAHA, LLC - ATTACHMENT E								
Company	NAME	Address	Type of Priority	Contingent	Unliquidated	Disputed	Claim Amount	Priority Amount
EAT FIT GO HEALTHY FOODS OMAHA LLC	Fredrickson, Mark W	18058 Honeysuckle Dr Elkhorn, NE 68022 UNITED STATES	Wages, Salaries, and Commissions	X	X	X	Unknown	Unknown
EAT FIT GO HEALTHY FOODS OMAHA LLC	Gaines, Alyssa M	19213 Costanzo Plaza Apt 3B Omaha, NE 68022 Douglas County UNITED STATES	Wages, Salaries, and Commissions	X	X	X	Unknown	Unknown
EAT FIT GO HEALTHY FOODS OMAHA LLC	Daigle, Rachelle	19317 Blondo St Omaha, NE 68022 Douglas County UNITED STATES	Wages, Salaries, and Commissions	X	X	X	Unknown	Unknown
EAT FIT GO HEALTHY FOODS OMAHA LLC	Bishop, Jessica	205 Matthies Dr Papillion, NE 68046 Sarpy County UNITED STATES	Wages, Salaries, and Commissions	X	X	X	Unknown	Unknown
EAT FIT GO HEALTHY FOODS OMAHA LLC	Robinson, Mackenzie	2121 Dana Ln Papillion, NE 68133 Sarpy County UNITED STATES	Wages, Salaries, and Commissions	X	X	X	Unknown	Unknown
EAT FIT GO HEALTHY FOODS OMAHA LLC	Gochenour, Ryan M	2259 Liberty Ave Missouri Valley, IA 51555 Harrison County UNITED STATES	Wages, Salaries, and Commissions	X	X	X	Unknown	Unknown
EAT FIT GO HEALTHY FOODS OMAHA LLC	Daigle, Rebecca J	23696 County Road P10 Arlington, NE 68002 UNITED STATES	Wages, Salaries, and Commissions	X	X	X	Unknown	Unknown
EAT FIT GO HEALTHY FOODS OMAHA LLC	Liebig, Alexis J	255 14th Ave Columbus, NE 68601 UNITED STATES	Wages, Salaries, and Commissions	X	X	X	Unknown	Unknown
EAT FIT GO HEALTHY FOODS OMAHA LLC	Sealey, Lauren	2603 S 8th St Council Bluffs, IA 51501 Pottawattamie County UNITED STATES	Wages, Salaries, and Commissions	X	X	X	Unknown	Unknown
EAT FIT GO HEALTHY FOODS OMAHA LLC	Norton, Bailey	2807 S 138th St Omaha, NE 68144 Douglas County UNITED STATES	Wages, Salaries, and Commissions	X	X	X	Unknown	Unknown
EAT FIT GO HEALTHY FOODS OMAHA LLC	Koca, Blaike	3108 Golden Eagle Circle Blair, NE 68008 UNITED STATES	Wages, Salaries, and Commissions	X	X	X	Unknown	Unknown
EAT FIT GO HEALTHY FOODS OMAHA LLC	Drew, Sidney J	4914 Capitol Ave Apt #6 Omaha, NE 68132 Douglas County UNITED STATES	Wages, Salaries, and Commissions	X	X	X	Unknown	Unknown

EAT FIT GO OMAHA, LLC - ATTACHMENT E								
Company	NAME	Address	Type of Priority	Contingent	Unliquidated	Disputed	Claim Amount	Priority Amount
EAT FIT GO HEALTHY FOODS OMAHA LLC	Linkhart, Kaitlynn A	5804 N 166th St Omaha, NE 68116 Douglas County UNITED STATES	Wages, Salaries, and Commissions	X	X	X	Unknown	Unknown
EAT FIT GO HEALTHY FOODS OMAHA LLC	Zielinski, Eddie	6305 Kentucky Rd Papillion, NE 68133 Sarpy County UNITED STATES	Wages, Salaries, and Commissions	X	X	X	Unknown	Unknown
EAT FIT GO HEALTHY FOODS OMAHA LLC	LeRiger, Mia	7107 S 140th Ave Omaha, NE 68138 Sarpy County UNITED STATES	Wages, Salaries, and Commissions	X	X	X	Unknown	Unknown
EAT FIT GO HEALTHY FOODS OMAHA LLC	Ivanova, Whitney	7315 Stafford Dr Pottawattamie County UNITED STATES	Wages, Salaries, and Commissions	X	X	X	Unknown	Unknown
EAT FIT GO HEALTHY FOODS OMAHA LLC	Kokotajlo, Sara	7532 Legacy St Papillion, NE 68046 Sarpy County UNITED STATES	Wages, Salaries, and Commissions	X	X	X	Unknown	Unknown
EAT FIT GO HEALTHY FOODS OMAHA LLC	Macossay, Jessica	8803 N 160th St Bennington, NE 68007 Douglas County UNITED STATES	Wages, Salaries, and Commissions	X	X	X	Unknown	Unknown
EAT FIT GO HEALTHY FOODS OMAHA LLC	Petersen, Sara E	9605 S 26th Ave Bellevue, NE 68147 Sarpy County UNITED STATES	Wages, Salaries, and Commissions	X	X	X	Unknown	Unknown
EAT FIT GO HEALTHY FOODS OMAHA LLC	Baillie, Jennalea G	9703 Jefferson Plz #8 Omaha, NE 68127 UNITED STATES	Wages, Salaries, and Commissions	X	X	X	Unknown	Unknown
EAT FIT GO HEALTHY FOODS OMAHA LLC	Giebler, Kathleen A	9806 S 176th St Omaha, NE 68136 Sarpy County UNITED STATES	Wages, Salaries, and Commissions	X	X	X	Unknown	Unknown

Fill in this information to identify the case:

Debtor name **Eat Fit Go Healthy Foods - Omaha, LLC**

United States Bankruptcy Court for the: **DISTRICT OF NEBRASKA**

Case number (if known) **18-81126**

☐ Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

☐ No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.

☒ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal* (Official Form 206A/B).

Property

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1. State what the contract or lease is for and the nature of the debtor's interest **304 North 179th Street**

State the term remaining **August 1, 2020**

List the contract number of any government contract

**180 Burke, LLC
1925 N. 120th St.
Omaha, NE 68154**

2.2. State what the contract or lease is for and the nature of the debtor's interest **Sublease Agreement**

State the term remaining **12/31/2018**

List the contract number of any government contract

**8877 South 137th Circle, LLC
14803 Frontier Road
Omaha, NE 68138**

2.3. State what the contract or lease is for and the nature of the debtor's interest **Lease to Commence on January 1, 2019.**

State the term remaining **December 31, 2025**

List the contract number of any government contract

**8877 South 137th Circle, LLC
14803 Frontier Road
Omaha, NE 68138**

2.4. State what the contract or lease is for and the nature of the debtor's interest **Millard Location - Note, this Lease is subject to a Motion to Reject.**

State the term remaining **Approx. 33 Months**

List the contract number of any government contract

**Lanoha 135 Millard LLC
Attn: Kris Carter
19111 W. Center Rd
Omaha, NE 68130**

Debtor 1 **Eat Fit Go Healthy Foods - Omaha, LLC**Case number (if known) **18-81126**

First Name

Middle Name

Last Name

Additional Page if You Have More Contracts or Leases**2. List all contracts and unexpired leases**

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.5. State what the contract or lease is for and the nature of the debtor's interest **1403 Farnam Location**

State the term remaining **Approx. 36 months**

List the contract number of any government contract _____

**Paxton Group, LLC
c/o Elkco Properties, Inc.
999 S Logan St., Suite 300
Denver, CO 80209**

2.6. State what the contract or lease is for and the nature of the debtor's interest **1419 West Maple Road Location**

State the term remaining **Approx. 34 Months**

List the contract number of any government contract _____

**Royce Grayhawk, LLC
12910 Pierce St., Suite 110
Dallas, TX 68144**

2.7. State what the contract or lease is for and the nature of the debtor's interest **Aksarben Location**

State the term remaining **Approx. 30 months.**

List the contract number of any government contract _____

**Waitt Aksarben 8, LLC
c/o Noddle Companies, 2285 S 67th St. Su
Omaha, NE 68106**

2.8. State what the contract or lease is for and the nature of the debtor's interest **1449 Papillion Road Location**

State the term remaining **December 31, 2021**

List the contract number of any government contract _____

**WC 370 LLC
17105 South Highway 50
Springfield, NE 68059**

Fill in this information to identify the case:

Debtor name **Eat Fit Go Healthy Foods - Omaha, LLC**

United States Bankruptcy Court for the: **DISTRICT OF NEBRASKA**

Case number (if known) **18-81126**

☐ Check if this is an amended filing

Official Form 206H
Schedule H: Your Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Do you have any codebtors?

- ☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.
☒ Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: Codebtor

Column 2: Creditor

Name

Mailing Address

Name

Check all schedules that apply:

2.1 Aaron McKeever

8240 Keystone Drive
Omaha, NE 68130

Access Bank

☒ D 2.1
☐ E/F _____
☐ G _____

2.2 Eat Fit Go
Healthy Foods
-Minnesota LLC

8877 S. 137th Cir
Suite 1
Omaha, NE 68138

Access Bank

☒ D 2.1
☐ E/F _____
☐ G _____

2.3 Eat Fit Go
Healthy Foods,
LLC

8877 S. 137th Cir
Suite 1
Omaha, NE 68138

Access Bank

☒ D 2.1
☐ E/F _____
☐ G _____

2.4 Eat Fit Go
Minnesota
Kitchen LLC

8877 S. 137th Cir
Suite 1
Omaha, NE 68138

Access Bank

☒ D 2.1
☐ E/F _____
☐ G _____

Debtor **Eat Fit Go Healthy Foods - Omaha, LLC**

Case number (if known) **18-81126**

Additional Page to List More Codebtors

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor

Column 2: Creditor

2.5	Eat Fit Go Omaha Kitchen LLC	8877 S. 137th Cir Suite 1 Omaha, NE 68138	Access Bank	<input checked="" type="checkbox"/> D <u>2.1</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
-----	---	--	--------------------	--

2.6	Sam Vakhidov	2325 S. 165th Omaha, NE 68134	Access Bank	<input checked="" type="checkbox"/> D <u>2.1</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
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2.7	Aaron McKeever	8240 Keystone Drive Omaha, NE 68130	180 Burke, LLC	<input type="checkbox"/> D _____ <input type="checkbox"/> E/F _____ <input checked="" type="checkbox"/> G <u>2.1</u>
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2.8	Aaron McKeever	8240 Keystone Drive Omaha, NE 68130	Waitt Aksarben 8, LLC	<input type="checkbox"/> D _____ <input type="checkbox"/> E/F _____ <input checked="" type="checkbox"/> G <u>2.7</u>
-----	-----------------------	--	----------------------------------	--

2.9	Aaron McKeever	8240 Keystone Drive Omaha, NE 68130	Paxton Group, LLC	<input type="checkbox"/> D _____ <input type="checkbox"/> E/F _____ <input checked="" type="checkbox"/> G <u>2.5</u>
-----	-----------------------	--	--------------------------	--

2.10	Aaron McKeever	8240 Keystone Drive Omaha, NE 68130	Royce Grayhawk, LLC	<input type="checkbox"/> D _____ <input type="checkbox"/> E/F _____ <input checked="" type="checkbox"/> G <u>2.6</u>
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2.11	Aaron McKeever	8240 Keystone Drive Omaha, NE 68130	Lanoha 135 Millard LLC	<input type="checkbox"/> D _____ <input type="checkbox"/> E/F _____ <input checked="" type="checkbox"/> G <u>2.4</u>
------	-----------------------	--	-----------------------------------	--

2.12	Sam Vakhidov	2325 S. 165th Omaha, NE 68134	180 Burke, LLC	<input type="checkbox"/> D _____ <input type="checkbox"/> E/F _____ <input checked="" type="checkbox"/> G <u>2.1</u>
------	---------------------	--	-----------------------	--

Debtor Eat Fit Go Healthy Foods - Omaha, LLC

Case number (if known) 18-81126

Additional Page to List More Codebtors

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor

Column 2: Creditor

2.13 **Sam Vakhidov** **2325 S. 165th**
Omaha, NE 68134

Paxton Group, LLC

☐ D _____

☐ E/F _____

☒ G 2.5

Fill in this information to identify the case:

Debtor name Eat Fit Go Healthy Foods - Omaha, LLC

United States Bankruptcy Court for the: DISTRICT OF NEBRASKA

Case number (if known) 18-81126

☐ Check if this is an amended filing

Official Form 207

Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy

04/16

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

Part 1: Income

1. Gross revenue from business

☐ None.

Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year

Sources of revenue
Check all that apply

Gross revenue
(before deductions and exclusions)

From the beginning of the fiscal year to filing date:

From 1/01/2018 to Filing Date

☒ Operating a business

\$2,491,556.76

☐ Other _____

For prior year:

From 1/01/2017 to 12/31/2017

☒ Operating a business

\$4,978,226.99

☐ Other _____

For year before that:

From 1/01/2016 to 12/31/2016

☒ Operating a business

\$2,966,934.75

☐ Other _____

2. Non-business revenue

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☐ None.

Description of sources of revenue

Gross revenue from each source
(before deductions and exclusions)

For prior year:

From 1/01/2017 to 12/31/2017

Interest Income

\$0.23

For year before that:

From 1/01/2016 to 12/31/2016

Interest Income

\$1,612.20

Part 2: List Certain Transfers Made Before Filing for Bankruptcy

3. Certain payments or transfers to creditors within 90 days before filing this case

List payments or transfers--including expense reimbursements--to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$6,425. (This amount may be adjusted on 4/01/19 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

Debtor **Eat Fit Go Healthy Foods - Omaha, LLC**Case number (if known) **18-81126**☐ None.

Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer <i>Check all that apply</i>
3.1. See Attachment 3		\$0.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input type="checkbox"/> Services <input type="checkbox"/> Other___

4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$6,425. (This amount may be adjusted on 4/01/19 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

☒ None.

Insider's name and address Relationship to debtor	Dates	Total amount of value	Reasons for payment or transfer
--	-------	-----------------------	---------------------------------

5. Repossessions, foreclosures, and returns

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

☒ None

Creditor's name and address	Describe of the Property	Date	Value of property
-----------------------------	--------------------------	------	-------------------

6. Setoffs

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

☒ None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
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Part 3: Legal Actions or Assignments**7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits**

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

☒ None.

Case title Case number	Nature of case	Court or agency's name and address	Status of case
---------------------------	----------------	------------------------------------	----------------

8. Assignments and receivership

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

☒ None**Part 4: Certain Gifts and Charitable Contributions****9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000**

Debtor **Eat Fit Go Healthy Foods - Omaha, LLC**Case number (if known) **18-81126**☐ None

	Recipient's name and address	Description of the gifts or contributions	Dates given	Value
9.1.	See Attachment 9			\$0.00
	Recipients relationship to debtor			

Part 5: Certain Losses**10. All losses from fire, theft, or other casualty within 1 year before filing this case.**☒ None

Description of the property lost and how the loss occurred	Amount of payments received for the loss	Dates of loss	Value of property lost
	If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received. List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).		

Part 6: Certain Payments or Transfers**11. Payments related to bankruptcy**

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☒ None.

Who was paid or who received the transfer? Address	If not money, describe any property transferred	Dates	Total amount or value
---	---	-------	-----------------------

12. Self-settled trusts of which the debtor is a beneficiary

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.

Do not include transfers already listed on this statement.

☒ None.

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
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13. Transfers not already listed on this statement

List any transfers of money or other property by sale, trade, or any other means made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

☒ None.

Who received transfer? Address	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
-----------------------------------	--	------------------------	-----------------------

Part 7: Previous Locations**14. Previous addresses**

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

☒ Does not apply

Debtor **Eat Fit Go Healthy Foods - Omaha, LLC**Case number (if known) **18-81126**

Address

Dates of occupancy
From-To**Part 8: Health Care Bankruptcies****15. Health Care bankruptcies**

Is the debtor primarily engaged in offering services and facilities for:

- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

- ☐ No. Go to Part 9.
- ☐ Yes. Fill in the information below.

Facility name and address

Nature of the business operation, including type of services
the debtor providesIf debtor provides meals
and housing, number of
patients in debtor's care**Part 9: Personally Identifiable Information****16. Does the debtor collect and retain personally identifiable information of customers?**

- ☐ No.
- ☐ Yes. State the nature of the information collected and retained.

17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?

- ☐ No. Go to Part 10.
- ☐ Yes. Does the debtor serve as plan administrator?

Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units**18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

- ☐ None

Financial Institution name and
AddressLast 4 digits of
account numberType of account or
instrumentDate account was
closed, sold,
moved, or
transferredLast balance
before closing or
transfer**19. Safe deposit boxes**

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

- ☐ None

Depository institution name and address

Names of anyone with
access to it
Address

Description of the contents

Do you still
have it?**20. Off-premises storage**

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

- ☐ None

Facility name and address

Names of anyone with
access to it

Description of the contents

Do you still
have it?

Debtor **Eat Fit Go Healthy Foods - Omaha, LLC**Case number (if known) **18-81126****Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own****21. Property held for another**

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

☒ None

Part 12: Details About Environment Information

For the purpose of Part 12, the following definitions apply:

Environmental law means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).

Site means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.

Hazardous material means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred.

22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- ☒ No.
☐ Yes. Provide details below.

Case title
Case number

Court or agency name and
address

Nature of the case

Status of case

23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?

- ☒ No.
☐ Yes. Provide details below.

Site name and address

Governmental unit name and
address

Environmental law, if known

Date of notice

24. Has the debtor notified any governmental unit of any release of hazardous material?

- ☒ No.
☐ Yes. Provide details below.

Site name and address

Governmental unit name and
address

Environmental law, if known

Date of notice

Part 13: Details About the Debtor's Business or Connections to Any Business**25. Other businesses in which the debtor has or has had an interest**

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

☒ None

Business name address

Describe the nature of the business

Employer Identification number

Do not include Social Security number or ITIN.

Dates business existed

26. Books, records, and financial statements

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

☐ None

Name and address

Date of service
From-To

Debtor **Eat Fit Go Healthy Foods - Omaha, LLC**Case number (if known) **18-81126****Name and address****Date of service
From-To**26a.1. **See Attachment 26A**

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

☐ None
Name and address**Date of service
From-To**26b.1. **See Attachment 26B**

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

☐ None
Name and address**If any books of account and records are
unavailable, explain why**26c.1. **See Attachment 26C**

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

☐ None
Name and address26d.1. **See Attachment 26D****27. Inventories**

Have any inventories of the debtor's property been taken within 2 years before filing this case?

☐ No

☒ Yes. Give the details about the two most recent inventories.
**Name of the person who supervised the taking of the
inventory****Date of inventory****The dollar amount and basis (cost, market,
or other basis) of each inventory**27.1 **Sara Peterson****07/31/2018****28550.39****Name and address of the person who has possession of
inventory records**
**Eat Fit Go Healthy Foods, LLC
8877 S. 137th Cir
Suite 1
Omaha, NE 68138**

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name**Address****Position and nature of any
interest****% of interest, if
any****Aaron McKeever**
**8240 Keystone Drive
Omaha, NE 68130**
Member

Debtor **Eat Fit Go Healthy Foods - Omaha, LLC**Case number (if known) **18-81126**

Name	Address	Position and nature of any interest	% of interest, if any
Sam Vakhidov	2325 S. 165th Omaha, NE 68134	Member	
Name	Address	Position and nature of any interest	% of interest, if any
Panorama Point Partners, LLC	13030 Pierce St Ste 300 Omaha, NE 68144	Member	
Name	Address	Position and nature of any interest	% of interest, if any
Jennifer Cain	2325 S. 218th Ave Elkhorn, NE 68022	CEO	

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

- ☐ No
☒ Yes. Identify below.

Name	Address	Position and nature of any interest	Period during which position or interest was held
Sam Vakhidov	2325 S. 165th Omaha, NE 68134	CEO	02/16-10/17
Name	Address	Position and nature of any interest	Period during which position or interest was held
Jennifer Cain	2325 S. 218th Ave Elkhorn, NE 68022	CEO	11/17-07/18

30. **Payments, distributions, or withdrawals credited or given to insiders**

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

- ☒ No
☐ Yes. Identify below.

Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
-------------------------------	--	-------	--------------------------------

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

- ☒ No
☐ Yes. Identify below.

Name of the parent corporation	Employer Identification number of the parent corporation
--------------------------------	--

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

- ☒ No
☐ Yes. Identify below.

Name of the parent corporation	Employer Identification number of the parent corporation
--------------------------------	--

Debtor Eat Fit Go Healthy Foods - Omaha, LLCCase number (if known) 18-81126**Part 14: Signature and Declaration**

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on September 17, 2018

/s/ Brock Hubert

Signature of individual signing on behalf of the debtor

Brock Hubert

Printed name

Position or relationship to debtor CEO

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

☐ No☒ Yes

EAT FIR GO OMAHA LLC - ATTACHMENT 3

Name	Type	Date	Memo	Amount
180 Burke, LLC				
	Check	05/01/2018	180 BURKE LLC 180 BURKE 202	\$4,221.20
	Check	06/01/2018	180 BURKE LLC 180 BURKE 202	\$4,221.20
	Check	07/02/2018	180 BURKE LLC 180 BURKE 202	\$4,221.20
ADP				
	Check	05/10/2018	ADP Tax ADP Tax 19EHW 051119A01	\$2,427.13
	Check	05/14/2018	ADP Tax ADP Tax 19GAW 051519A01	\$7,673.80
	Bill Pmt -Che	05/18/2018	Memo:CHECK 1516	\$1,317.60
	Check	05/24/2018	ADP Tax ADP Tax 19EHW 052521A01	\$2,542.97
	Check	05/31/2018	ADP Tax ADP Tax 19GAW 060121A01	\$4,644.91
	Check	06/07/2018	ADP Tax ADP Tax 19EHW 060823A01	\$2,392.58
	Bill Pmt -Che	06/08/2018	Memo:CHECK 1539	\$1,382.70
	Bill Pmt -Che	06/14/2018	Memo:CHECK 1546	\$86.50
	Check	06/14/2018	ADP Tax ADP Tax 19GAW 061524A01	\$6,636.15
	Check	06/21/2018	ADP Tax ADP Tax 19EHW 062225A01	\$2,294.91
	Check	06/28/2018	ADP Tax ADP Tax 19GAW 062926A01	\$4,572.34
	Bill Pmt -Che	06/29/2018	Memo:CHECK 1557	\$1,252.70
	Check	07/05/2018	ADP Tax ADP Tax 19EHW 070627A01	\$2,406.29
	Check	07/12/2018	ADP Tax ADP Tax 19GAW 071328A01	\$5,266.00
	Bill Pmt -Che	07/13/2018	Memo:CHECK 1571	\$15.00
	Bill Pmt -Che	07/19/2018	Memo:CHECK 1581	\$83.50
	Check	07/19/2018	ADP Tax ADP Tax 19EHW 072029A01	\$2,173.21
	Bill Pmt -Che	07/27/2018	Memo:CHECK 1592	\$15.00
	Check	07/31/2018	ADP Tax ADP Tax 19GAW 080130A01	\$4,466.57
American Cancer Society				
	Bill Pmt -Che	06/22/2018		\$1,524.48
American Lung Association				
	Bill Pmt -Che	07/19/2018		\$11.83
Black Hills Energy				
	Bill Pmt -Che	05/10/2018	Acct #8141 0848 15	\$178.62
	Bill Pmt -Che	06/01/2018	Memo:CHECK 1531	\$259.06
	Bill Pmt -Che	07/16/2018	QuickBooks generated zero amount transaction for bill payment stub	
CIntas-9365				

EAT FIR GO OMAHA LLC - ATTACHMENT 3

Name	Type	Date	Memo	Amount
Cintas-9462	Bill Pmt -Che	05/04/2018	Memo:CHECK 1504	\$67.78
	Bill Pmt -Che	05/23/2018	Memo:CHECK 1524	\$23.49
	Bill Pmt -Che	07/06/2018	Memo:CHECK 1567	\$67.78
Cintas-9532	Bill Pmt -Che	05/04/2018	Memo:CHECK 1505	\$91.75
	Bill Pmt -Che	06/29/2018	Memo:CHECK 1558	\$47.45
Cintas-9768	Bill Pmt -Che	05/04/2018	Memo:CHECK 1506	\$57.08
	Bill Pmt -Che	05/18/2018	Memo:CHECK 1517	\$95.39
	Bill Pmt -Che	07/06/2018	Memo:CHECK 1568	\$48.33
Cintas-9769	Bill Pmt -Che	05/04/2018	Memo:CHECK 1507	\$95.39
	Bill Pmt -Che	07/06/2018	Memo:CHECK 1569	\$51.09
Cintas-9819	Bill Pmt -Che	05/04/2018	Memo:CHECK 1508	\$74.63
	Bill Pmt -Che	05/23/2018	Memo:CHECK 1525	\$96.34
City of Omaha	Bill Pmt -Che	06/08/2018	Memo:CHECK 1540	\$96.34
	Bill Pmt -Che	06/22/2018	Memo:CHECK 1552	\$52.00
	Bill Pmt -Che	07/13/2018	VOID:	
Cox Omaha	Check	07/05/2018	COX COMM OMA BANK DRAFT 132039566701001	\$137.30
	Check	07/23/2018	COX COMM OMA BANK DRAFT 132039566701001	\$239.36
	Check	07/31/2018	CHECK 1587	\$148.50
Cox Omaha-2701	Bill Pmt -Che	06/01/2018	Memo:CHECK 1532	\$267.37
	Bill Pmt -Che	06/29/2018	Memo:CHECK 1559	\$267.37
Cox Omaha-5501	Bill Pmt -Che	05/10/2018	Memo:CHECK 1513	\$258.36
	Bill Pmt -Che	06/08/2018	Memo:CHECK 1541	\$127.13
	Bill Pmt -Che	07/19/2018	Memo:CHECK 1583	\$126.78
Cox Omaha-5901				

EAT FIR GO OMAHA LLC - ATTACHMENT 3

Name	Type	Date	Memo	Amount
	Bill Pmt -Che	05/18/2018	Memo:CHECK 1518	\$134.66
	Bill Pmt -Che	06/14/2018	Memo:CHECK 1547	\$134.66
	Bill Pmt -Che	07/19/2018	Memo:CHECK 1584	\$134.62
Cox Omaha-7201				
	Bill Pmt -Che	05/18/2018	Memo:CHECK 1519	\$122.81
	Bill Pmt -Che	06/14/2018	Memo:CHECK 1548	\$122.81
	Bill Pmt -Che	07/19/2018	Memo:CHECK 1585	\$122.77
Cox Omaha-8701				
	Bill Pmt -Che	05/18/2018	Memo:CHECK 1520	\$148.54
	Bill Pmt -Che	06/14/2018	Memo:CHECK 1549	\$148.54
Cox Omaha - 6701				
	Bill Pmt -Che	07/19/2018	Memo:CHECK 1586	\$376.66
Cox Omaha - 8701				
	Bill Pmt -Che	07/19/2018	Memo:COX COMM OMA BANK DRAFT 132039488701001	\$148.50
DNB Electrical Contracting, Inc.				
	Bill Pmt -Che	06/22/2018	Memo:CHECK 1553	\$125.00
Erik Bird				
	Bill Pmt -Che	07/13/2018	Memo:CHECK 1573	\$874.43
Fast Signs				
	Bill Pmt -Che	06/22/2018		\$331.87
	Bill Pmt -Che	06/29/2018	Memo:CHECK 1560	\$10.70
Fish Window Cleaning				
	Bill Pmt -Che	05/18/2018	Memo:CHECK 1521	\$74.90
Halo Branded Solutions, Inc.				
	Bill Pmt -Che	07/13/2018		\$367.03
Lanoha 135 Millard LLC				
	Bill Pmt -Che	05/01/2018	Memo:CHECK 1503	\$3,500.00
	Bill Pmt -Che	06/01/2018		\$3,500.00
	Bill Pmt -Che	07/27/2018	Memo:CHECK 1593	\$2,750.00
Loud & Clear Electronics				
	Bill Pmt -Che	06/08/2018	Memo:CHECK 1542	\$86.00
Lutz				
	Bill Pmt -Che	05/18/2018	Client #15164.0	\$2,173.25

EAT FIR GO OMAHA LLC - ATTACHMENT 3

Name	Type	Date	Memo	Amount
	Bill Pmt -Che	06/22/2018		\$5,758.75
Mark Fredrickson				
	Bill Pmt -Che	07/13/2018	Memo:CHECK 1575	\$874.43
Marking Refrigeration, Inc.				
	Bill Pmt -Che	06/08/2018	Memo:CHECK 1543	\$605.01
MetLife				
	Bill Pmt -Che	07/27/2018	Memo:CHECK 1594	\$110.82
Metropolitan Utilities District				
	Bill Pmt -Che	05/04/2018	Memo:CHECK 1509	\$78.30
	Bill Pmt -Che	06/01/2018	Memo:CHECK 1534	\$110.75
	Bill Pmt -Che	07/06/2018	Memo:CHECK 1570	\$43.91
	Bill Pmt -Che	07/19/2018	Memo:METRO-UTIL-DIST UTIL-PMNTS 9851850	\$48.20
	Bill Pmt -Che	07/27/2018	Memo:CHECK 1595	\$48.28
	Check	07/30/2018	CHECK 1588	\$48.20
Michael Management Inc.				
	Bill Pmt -Che	07/13/2018	VOID:	
Nebraska Department of Revenue				
	Check	05/23/2018	NBF BUS TX NEB DEPT REVENUE TXP*01012130087*04100*180430*T*0000	\$649.75
	Check	06/22/2018	NBF BUS TX NEB DEPT REVENUE TXP*01012130087*04100*180531*T*0000	\$350.27
	Check	07/23/2018	NBF BUS TX NEB DEPT REVENUE TXP*01012130087*04100*180630*T*0000	\$553.72
Noddle Companies				
	Bill Pmt -Che	07/13/2018	Memo:CHECK 1577	\$905.83
NoshSense				
	Bill Pmt -Che	05/18/2018	Memo:CHECK 1515	\$220.00
	Bill Pmt -Che	07/31/2018	Memo:CHECK 1597	\$220.00
Omaha Kitchen				
	Bill Pmt -Che	05/05/2018		\$31,935.41
	Bill Pmt -Che	05/08/2018		\$3,837.69
	Bill Pmt -Che	05/08/2018		\$35,803.07
	Bill Pmt -Che	05/15/2018		
	Bill Pmt -Che	05/15/2018		\$2,878.23
	Bill Pmt -Che	05/21/2018		\$4,772.92
	Bill Pmt -Che	05/22/2018		\$32,427.80

EAT FIR GO OMAHA LLC - ATTACHMENT 3

Name	Type	Date	Memo	Amount
	Bill Pmt -Che	05/29/2018	110011945 ONLINE XFER TO 16008385 ON 5/29/18 AT 11:57	\$29,180.75
	Bill Pmt -Che	05/29/2018		\$3,332.51
	Bill Pmt -Che	05/30/2018		\$1,565.74
	Bill Pmt -Che	06/01/2018		\$29,590.17
	Bill Pmt -Che	06/05/2018	117407990 ONLINE XFER TO 16008385 ON 6/05/18 AT 9:52	\$3,707.60
	Bill Pmt -Che	06/11/2018	111927393 ONLINE XFER TO 16008385 ON 6/11/18 AT 14:18	\$30,837.91
	Bill Pmt -Che	06/11/2018	111932414 ONLINE XFER TO 16008385 ON 6/11/18 AT 14:18	\$4,035.08
	Bill Pmt -Che	06/18/2018	110648151 ONLINE XFER TO 16008385 ON 6/18/18 AT 12:02	\$30,271.54
	Bill Pmt -Che	06/18/2018	110657039 ONLINE XFER TO 16008385 ON 6/18/18 AT 12:03	\$3,754.59
	Bill Pmt -Che	06/25/2018	111798296 ONLINE XFER TO 16008385 ON 6/25/18 AT 13:38	\$29,502.93
	Bill Pmt -Che	06/25/2018	112497211 ONLINE XFER TO 16008385 ON 6/25/18 AT 14:08	\$2,810.20
	Bill Pmt -Che	07/02/2018	110694963 ONLINE XFER TO 16008385 ON 7/02/18 AT 12:11	\$28,243.41
	Bill Pmt -Che	07/02/2018	110719346 ONLINE XFER TO 16008385 ON 7/02/18 AT 12:13	\$3,777.07
	Bill Pmt -Che	07/09/2018	119250933 ONLINE XFER TO 16008385 ON 7/09/18 AT 11:52	\$23,260.57
	Bill Pmt -Che	07/09/2018	119260752 ONLINE XFER TO 16008385 ON 7/09/18 AT 11:53	\$2,866.38
	Bill Pmt -Che	07/16/2018	118276948 ONLINE XFER TO 16008385 ON 7/16/18 AT 10:28	\$30,112.38
	Bill Pmt -Che	07/16/2018	118319168 ONLINE XFER TO 16008385 ON 7/16/18 AT 10:32	\$3,890.80
	Bill Pmt -Che	07/23/2018	110606602 ONLINE XFER TO 16008385 ON 7/23/18 AT 14:01	\$31,033.97
	Bill Pmt -Che	07/23/2018	110615172 ONLINE XFER TO 16008385 ON 7/23/18 AT 14:02	\$3,692.23
	Bill Pmt -Che	07/31/2018	114195423 ONLINE XFER TO 16008385 ON 7/31/18 AT 9:56	\$4,455.78
	Bill Pmt -Che	07/31/2018	114185543 ONLINE XFER TO 16008385 ON 7/31/18 AT 9:55	\$29,534.38
Omaha Public Power District	Bill Pmt -Che	05/04/2018	Memo:CHECK 1510	\$442.59
	Bill Pmt -Che	05/10/2018	Acct #8904601144	\$317.10
	Bill Pmt -Che	05/18/2018	Memo:CHECK 1523	\$337.57
	Bill Pmt -Che	05/23/2018	Memo:CHECK 1526	\$391.25
	Bill Pmt -Che	06/01/2018	Memo:CHECK 1535	\$275.91
	Bill Pmt -Che	06/08/2018	Memo:CHECK 1544	\$443.16
	Bill Pmt -Che	06/13/2018	O.P.P.D. ELEC BILL XXXXXX8741	\$226.66
	Bill Pmt -Che	06/14/2018	Memo:CHECK 1550	\$329.65
	Bill Pmt -Che	07/11/2018	O.P.P.D. ELEC BILL XXXXXX9075	\$335.54
	Bill Pmt -Che	07/16/2018	O.P.P.D. ELEC BILL XXXXXX8741	\$97.20
	Bill Pmt -Che	07/16/2018	O.P.P.D. ELEC BILL XXXXXX7385	\$323.93

EAT FIR GO OMAHA LLC - ATTACHMENT 3

Name	Type	Date	Memo	Amount
	Bill Pmt -Che	07/19/2018	Memo:CHECK 1589	\$1,044.82
	Bill Pmt -Che	07/19/2018	Memo:CHECK 1591	\$415.87
Operation Gratitude				
	Bill Pmt -Che	07/13/2018	Memo:CHECK 1578	\$525.00
Paxton Group LLC				
	Bill Pmt -Che	05/01/2018	Memo:CHECK 1500	\$5,387.65
	Bill Pmt -Che	06/01/2018	Memo:CHECK 1536	\$5,387.65
	Bill Pmt -Che	06/29/2018	Memo:CHECK 1561	\$5,387.65
Persolvent PURCHASE				
	Check	05/16/2018	Persolvent PURCHASE 46481506	\$9.99
	Check	05/16/2018	Persolvent PURCHASE 46481511	\$9.99
	Check	05/16/2018	Persolvent PURCHASE 46481516	\$9.99
	Check	05/16/2018	Persolvent PURCHASE 46481519	\$9.99
	Check	05/16/2018	Persolvent PURCHASE 46481522	\$9.99
	Check	05/16/2018	Persolvent PURCHASE 46481527	\$9.99
	Check	05/16/2018	Persolvent PURCHASE 46481537	\$9.99
	Check	06/18/2018	Persolvent PURCHASE 47132416	\$9.99
	Check	06/18/2018	Persolvent PURCHASE 47132417	\$9.99
	Check	06/18/2018	Persolvent PURCHASE 47132421	\$9.99
	Check	06/18/2018	Persolvent PURCHASE 47132427	\$9.99
	Check	06/18/2018	Persolvent PURCHASE 47132433	\$9.99
	Check	06/18/2018	Persolvent PURCHASE 47132434	\$9.99
	Check	06/18/2018	Persolvent PURCHASE 47132438	\$9.99
	Check	07/17/2018	Persolvent PURCHASE 47655243	\$9.99
	Check	07/17/2018	Persolvent PURCHASE 47655245	\$9.99
	Check	07/17/2018	Persolvent PURCHASE 47655247	\$9.99
	Check	07/17/2018	Persolvent PURCHASE 47655251	\$9.99
	Check	07/17/2018	Persolvent PURCHASE 47655257	\$9.99
	Check	07/17/2018	Persolvent PURCHASE 47655261	\$9.99
	Check	07/17/2018	Persolvent PURCHASE 47655265	\$9.99
Pet Passion Technology				
	Check	06/07/2018	Memo:CHECK 1004	\$295.00
QPark Omaha				

EAT FIR GO OMAHA LLC - ATTACHMENT 3

Name	Type	Date	Memo	Amount
	Bill Pmt -Che	05/23/2018	Memo:GIFT CARD & LOYA EAT FIT GO 858-569-8842	\$300.00
	Bill Pmt -Che	06/29/2018	Memo:CHECK 1562	\$300.00
	Bill Pmt -Che	07/27/2018	Memo:CHECK 1596	\$300.00
Revel Systems Sales				
	Check	05/01/2018	REVEL SYSTEMS I PAYMENT 33208	\$307.00
	Check	05/01/2018	REVEL SYSTEMS I PAYMENT 32233	\$307.00
	Check	05/01/2018	REVEL SYSTEMS I PAYMENT 56742	\$358.70
	Check	05/01/2018	REVEL SYSTEMS I PAYMENT 64912	\$387.70
	Check	05/01/2018	REVEL SYSTEMS I PAYMENT 59317	\$458.70
	Check	05/01/2018	REVEL SYSTEMS I PAYMENT 30433	\$455.00
	Check	06/04/2018	REVEL SYSTEMS I PAYMENT 59317	\$279.70
	Check	06/04/2018	REVEL SYSTEMS I PAYMENT 33208	\$307.00
	Check	06/04/2018	REVEL SYSTEMS I PAYMENT 64912	\$387.70
	Check	06/04/2018	REVEL SYSTEMS I PAYMENT 32233	\$407.00
	Check	06/04/2018	REVEL SYSTEMS I PAYMENT 30433	\$455.00
	Check	06/04/2018	REVEL SYSTEMS I PAYMENT 56742	\$458.70
	Check	06/25/2018	REVEL SYSTEMS I PAYMENT 59317	\$79.00
	Check	07/03/2018	REVEL SYSTEMS I PAYMENT 32233	\$407.00
	Check	07/03/2018	REVEL SYSTEMS I PAYMENT 56742	\$458.70
	Check	07/03/2018	REVEL SYSTEMS I PAYMENT 33208	\$307.00
	Check	07/03/2018	REVEL SYSTEMS I PAYMENT 59317	\$358.70
	Check	07/03/2018	REVEL SYSTEMS I PAYMENT 64912	\$387.70
	Check	07/03/2018	REVEL SYSTEMS I PAYMENT 30433	\$455.00
Royce WGH, LLC				
	Bill Pmt -Che	05/01/2018	Memo:CHECK 1501	\$4,303.98
	Bill Pmt -Che	06/01/2018	Memo:CHECK 1537	\$4,303.98
	Bill Pmt -Che	06/29/2018	Memo:CHECK 1563	\$4,383.98
Ryan Gochenour				
	Bill Pmt -Che	05/25/2018	Memo:CHECK 1529	\$322.54
Sensaphone				
	Bill Pmt -Che	07/13/2018	Memo:CHECK 1579	\$17.85
Service Charge				
	Check	05/31/2018	SERVICE CHARGE	\$105.90

EAT FIR GO OMAHA LLC - ATTACHMENT 3

Name	Type	Date	Memo	Amount
Stanek Fire Protection	Check	06/29/2018	SERVICE CHARGE	\$99.00
	Check	07/31/2018	SERVICE CHARGE	\$108.00
	Bill Pmt -Che	06/14/2018	Memo:CHECK 1551	\$50.00
Synergy World	Check	05/07/2018	GIFT CARD & LOYA GIFTCARD 858-569-8842	\$220.62
	Check	05/07/2018	GIFT CARD & LOYA GIFTCARD 858-569-8842	\$231.24
	Check	05/07/2018	GIFT CARD & LOYA GIFTCARD 858-569-8842	\$238.23
	Check	05/07/2018	GIFT CARD & LOYA EAT FIT GO 858-569-8842	\$250.00
	Check	05/07/2018	GIFT CARD & LOYA GIFTCARD 858-569-8842	\$254.97
	Check	05/07/2018	GIFT CARD & LOYA GIFTCARD 858-569-8842	\$282.39
	Check	05/07/2018	GIFT CARD & LOYA GIFTCARD 858-569-8842	\$288.06
	Check	05/07/2018		\$300.00
	Check	06/08/2018	GIFT CARD & LOYA GIFTCARD 858-569-8842	\$128.61
	Check	06/08/2018	GIFT CARD & LOYA GIFTCARD 858-569-8842	\$132.51
	Check	06/08/2018	GIFT CARD & LOYA GIFTCARD 858-569-8842	\$139.89
	Check	06/08/2018	GIFT CARD & LOYA GIFTCARD 858-569-8842	\$143.70
	Check	06/08/2018	GIFT CARD & LOYA GIFTCARD 858-569-8842	\$150.84
	Check	06/08/2018	GIFT CARD & LOYA GIFTCARD 858-569-8842	\$198.84
	Check	06/12/2018	GIFT CARD POOLIN GIFTCARD 858-569-8842	\$1,511.17
	Check	06/12/2018	GIFT CARD POOLIN GIFTCARD 858-569-8842	\$1,597.79
	Check	06/14/2018	GIFT CARD & LOYA EAT FIT GO 858-569-8842	\$250.00
	Check	06/14/2018	GIFT CARD & LOYA EAT FIT GO 858-569-8842	\$300.00
	Check	07/09/2018	GIFT CARD & LOYA GIFTCARD 858-569-8842	\$130.47
	Check	07/09/2018	GIFT CARD & LOYA GIFTCARD 858-569-8842	\$134.46
	Check	07/09/2018	GIFT CARD & LOYA GIFTCARD 858-569-8842	\$142.47
	Check	07/09/2018	GIFT CARD & LOYA GIFTCARD 858-569-8842	\$146.37
	Check	07/09/2018	GIFT CARD & LOYA GIFTCARD 858-569-8842	\$154.32
	Check	07/09/2018	GIFT CARD & LOYA GIFTCARD 858-569-8842	\$213.33
	Check	07/12/2018	GIFT CARD POOLIN GIFTCARD 858-569-8842	\$395.91
	Check	07/18/2018	GIFT CARD & LOYA EAT FIT GO 858-569-8842	\$250.00
	Check	07/18/2018	GIFT CARD & LOYA EAT FIT GO 858-569-8842	\$300.00
Tech Checks, Inc				

EAT FIR GO OMAHA LLC - ATTACHMENT 3

Name	Type	Date	Memo	Amount
The Hartford - 30001	Check	07/19/2018	Memo:Tech Checks Inc WEB PMTS D6S8P9	\$76.90
	Bill Pmt -Che	05/23/2018	Memo:CHECK 1528	\$380.19
	Bill Pmt -Che	06/30/2018	QuickBooks generated zero amount transaction for bill payment stub	
	Bill Pmt -Che	07/30/2018	QuickBooks generated zero amount transaction for bill payment stub	
	Bill Pmt -Che	07/31/2018	QuickBooks generated zero amount transaction for bill payment stub	
Thermal Services				
	Bill Pmt -Che	07/19/2018	VOID:	
TSYS FEES				
	Check	05/02/2018	TSYS FEES SEP 84870052441099	\$41.20
	Check	05/02/2018	TSYS FEES SEP 84870052371774	\$44.95
	Check	05/02/2018	TSYS FEES SEP 84870052399251	\$44.95
	Check	05/02/2018	TSYS FEES SEP 84870052255955	\$124.83
	Check	05/03/2018	TSYS FEES SEP 84870052440922	\$103.36
	Check	06/04/2018	TSYS FEES SEP 84870052441099	\$41.20
	Check	06/04/2018	TSYS FEES SEP 84870052371774	\$44.95
	Check	06/04/2018	TSYS FEES SEP 84870052399251	\$44.95
	Check	06/04/2018	TSYS FEES SEP 84870052255955	\$113.71
	Check	06/05/2018	TSYS FEES SEP 84870052440922	\$100.70
	Check	07/02/2018	TSYS FEES SEP 84870052441099	\$41.20
	Check	07/02/2018	TSYS FEES SEP 84870052371774	\$44.95
	Check	07/02/2018	TSYS FEES SEP 84870052399251	\$44.95
	Check	07/02/2018	TSYS FEES SEP 84870052255955	\$69.68
	Check	07/03/2018	TSYS FEES SEP 84870052440922	\$73.05
United Natural Foods East, Inc.				
	Bill Pmt -Che	06/08/2018	Memo:CHECK 1545	\$1,193.20
	Bill Pmt -Che	06/29/2018	Memo:CHECK 1564	\$5,441.31
	Bill Pmt -Che	06/29/2018	Memo:CHECK 1566	\$348.83
	Check	07/09/2018	Memo:CHECK 1005	\$327.61
	Check	07/18/2018	Memo:CHECK 1006	\$306.11
	Bill Pmt -Che	07/20/2018	Memo:CHECK 1007	\$660.95
	Check	07/31/2018	Memo:CHECK 1008	\$547.95
United Way of Midlands				

EAT FIR GO OMAHA LLC - ATTACHMENT 3

Name	Type	Date	Memo	Amount
Waitt Aksarben 8 LLC	Bill Pmt -Che	05/25/2018	Memo:CHECK 1530	\$2,831.60
	Check	05/01/2018	WAITT AKSARBEN 8 DEBITS EAT FIT GO	\$4,210.46
	Bill Pmt -Che	05/04/2018	VOID:	
	Check	06/01/2018	WAITT AKSARBEN 8 DEBITS EAT FIT GO	\$3,906.04
	Check	07/02/2018	WAITT AKSARBEN 8 DEBITS EAT FIT GO	\$3,900.80
WC 370 LLC	Bill Pmt -Che	05/01/2018	Memo:CHECK 1502	\$3,186.89
	Bill Pmt -Che	06/01/2018	Memo:CHECK 1538	\$3,161.18
	Bill Pmt -Che	06/29/2018	Memo:CHECK 1565	\$3,172.25
Petersen, Sara		05/15/18	Bonus	\$1,200.00
		06/15/18	Bonus	\$1,700.00
		06/15/18	Expense Reimbursement	\$320.00
		07/01/18	Expense Reimbursement	\$443.90
		07/15/18	Bonus	\$1,700.00
		07/15/18	Expense Reimbursement	\$871.56
		08/01/18	Expense Reimbursement	\$872.44
Bird, Erik		05/15/18	Expense Reimbursement	\$126.79
		06/01/18	Expense Reimbursement	\$89.36
		07/01/18	Expense Reimbursement	\$183.54
		07/15/18	Expense Reimbursement	\$186.75
		08/01/18	Expense Reimbursement	\$86.74
Fredrickson, Mark		06/15/18	Expense Reimbursement	\$176.55
		07/01/18	Expense Reimbursement	\$151.94
		08/01/18	Expense Reimbursement	\$224.17
Baillie, Jennalea		06/15/18	Bonus	\$250.00
		07/15/18	Expense Reimbursement	\$96.78
		08/01/18	Expense Reimbursement	\$52.77

EAT FIR GO OMAHA LLC - ATTACHMENT 3

Name	Type	Date	Memo	Amount
Markham, Erin		05/15/18	Expense Reimbursement	\$500.00

EAT FIT GO OMAHA LLC - ATTACHMENT 9

Organization	Address	Date	Amount	Item Donated	Person of Contact (who approved)
UNL Auction Fundraiser		7/30/2018	\$50.00		Erik Bird
Donated expired meals to Table Grace		8/25/2018	\$96.25		Sara Petersen
National Firefighters Day - meal donation		5/4/2018	\$102.00		Millard
National Firefighters Day - meal donation		5/4/2018	\$51.00		
National Firefighters Day - meal donation		5/4/2018	\$85.00		Maple
National Firefighters Day - meal donation		5/4/2018	\$102.00		Farnam
National Firefighters Day - meal donation		5/4/2018	\$102.00		Papillion
Ankeny Centennial High School - raffle prize		3/21/2017	\$26.00		Ankeny
50 meals - Sarpy County Fair		8/3/2017	\$412.50		Jen Cain
6 pans of food for samples - Brew Haha, Habitat for Hummanity Fundraiser		9/7/2017	\$175.00		Sam Vakhidov
6 pans of food for samples - Brew Haha, Habitat for Hummanity Fundraiser		9/6/2018	\$175.00		Sara Petersen & Kat Hrabovsky
St. Patrick's Catholic, donated % of sales to school		5/25/2017	\$37.53		Jen Cain & Sara Petersen
Operation Gratitude		07/011-07/07	\$525.00		Jen Cain & Kat Hrabovsky
American Cancer Society - Donated % of sales of Omaha stores on 06/20/18		6/20/2018	\$1,524.18		Jen Cain & Kat Hrabovsky
School Fundraiser night at Papillion for Patriot Elementary		12/1/2017	\$55.05		Jen Cain
St. Pat's Teacher Meal Donation		2.22.18	\$522.00		Jen Cain
JDRF Donation		8.31.17	\$120.00		Jen Cain
FitGirl		7.23.18	\$1,067.33		Mark Fredrickson
FitGirl		7.31.18	\$1,067.33		Mark Fredrickson
FitGirl		7.23.17	\$606.69		Mark Fredrickson
FitGirl		7.25.17	\$606.69		Mark Fredrickson
KU Med Fundraiser		3.5.18	\$25.00	GC	Jen Cain & Tanner Hinkel
Big Brother Big Sister		2.18.18	\$25.00	GC	Jen Cain & Tanner Hinkel
Luekemia & Lymphoma Society		5.7.18	\$50.00	GC, tote, hat	Jen Cain & Tanner Hinkel
Visitation Catholic School		11.6.17	\$30.00	GC	Jen Cain & Tanner Hinkel
Mill Creek Elementary		11.9.17	\$25.00	GC	Jen Cain & Tanner Hinkel
St Teresa's Academy Auction		11.7.17	\$50.00	GC	Jen Cain & Tanner Hinkel
Shawnee Mission East		10.23.17	\$40.00	GC	Jen Cain & Tanner Hinkel
United Way		9.1.17	\$30.00	GC	Jen Cain & Tanner Hinkel
Trailwood Elementary		9.12.17	\$50.00	GC	Jen Cain & Tanner Hinkel
The Kidney Walk		8.22.17	\$75.00	GC	Jen Cain & Tanner Hinkel
Celiac Walk		8.1.17	\$250.00	GC	Jen Cain & Tanner Hinkel
Head for the Cure		6.30.17	\$150.00	GC	Jen Cain & Tanner Hinkel
			\$8,037.30		
stonebridge donation		7/30/2018	\$15.00		Sara Peterson
stonebridge donation		7/30/2018	\$15.00		Sara Peterson

influencer - gift card	7/31/2018	\$50.00	Victoria
Gift card donation to Brownell Talbott	3/19/2018	\$20.00	180/Dodge
Gift card donation to Elkhorn Public Schools	4/2/2018	\$20.00	180/dodge
Union Pacific Health Fair	3/22/2017	\$25.00	Farnam
Ankeny Centennial High School	3/21/2017	\$20.00	Ankeny, IA
Rising View - Military Housing Donation	9/5/2017	\$50.00	Papillion
Crossfit Viral - Brest Cancer Awareness Benefit	9/5/2017	\$50.00	Maple
Cancer Alliance of Nebraska	7/17/2017	\$25.00	Aksarben

\$290.00

TOTAL **\$8,327.30**

Attachment 26A

Name	Address	Dates of Service
CFO Systems, LLC	10832 Old Mill Rd #2, Omaha, NE 68154	7/17-12/17, 5/18-6/18
Steier & Prchal, Ltd.	1015 N. 98th Street, Suite 100, Omaha, NE 68114	12/2015-09/2017
Lutz	13616 California Street, Suite 300, Omaha, NE 68154	12/2017-07/2018
Amy Staley	14516 Fowler Avenue, Omaha, NE 68116	01/2017-05/2018
Whitney Ivanova	7315 Stafford Drive, Council Bluffs, IA 51503	05/2018-Present
Brooke Hogan	5621 N 112th Circle, Omaha, NE 68164	08/2016-Present
Chancy Johnson	1903 Oriole Drive, Bellevue, NE 68123	05/2018-Present
Sydni Bechler	11101 M St, Apt #101, Omaha, NE 68137	03/2017-02/2018
Mike Morgan	5615 S. 174th Street, Omaha, NE 68135	07/2018-Present

Attachment 26B

Name	Address	Dates of Service
CFO Systems, LLC	10832 Old Mill Rd #2, Omaha, NE 68154	07/2017-12/2017
Steier & Prchal, Ltd.	1015 N. 98th Street, Suite 100, Omaha, NE 68114	12/2015-09/2017
Lutz	13616 California Street, Suite 300, Omaha, NE 68154	12/2017-07/2018
Brooke Hogan	5621 N 112th Circle, Omaha, NE 68164	08/2016-Present

Attachment 26C

Name	Address	Dates of Service
Lutz	13616 California Street, Suite 300, Omaha, NE 68154	12/2017-07/2018
Whitney Ivanova	7315 Stafford Drive, Council Bluffs, IA 51503	05/2018-Present
Brooke Hogan	5621 N 112th Circle, Omaha, NE 68164	08/2016-Present
Chancy Johnson	1903 Oriole Drive, Bellevue, NE 68123	05/2018-Present
Mike Morgan	5615 S. 174th Street, Omaha, NE 68135	07/2018-Present

Attachment 26D

Name

Address

Panorama Point Partners LLC
Access Bank

13030 Pierce Street, Suite 300, Omaha, NE 68144
2710 South 140th Street, Omaha, NE 68144